

# MONTANA MORTGAGE BROKER OR LENDER SURETY BOND

State of Domicile

This bond is continuous from the date of execution and may be extended from calendar year to calendar year.

1. Any person or entity, including the State of Montana, who sustains injury by reason of any action or omission covered by this bond, in addition to any other remedy that he, she or it may have, may bring an action in his or her own name on this bond for the recovery of damages sustained; provided, however that no such action may be brought after release of the bond.

2. The total aggregate liability of the surety shall be limited to \$\_\_\_\_\_ (\$50,000 for new applicants as of July 1, 2009, or contact the Division for the bond requirement for licenses issued prior to July 1, 2009).

3. This bond shall be deemed continuous in form and shall remain in full force and effect until the Commissioner of Banking releases the surety from liability or the surety cancels this bond.

4. Surety may cancel this bond and be relieved of further liability by giving 30 days written notice to the Department of Administration, Division of Banking and Financial Institutions at P.O. Box 200546, Helena MT 59620-0546, but such cancellation shall not affect any liability incurred or accrued prior to the termination of the notice period.

5. If principal and surety, or either of them, is served with notice of any action brought against principal or surety under this bond, written notice of the filing of such action shall be immediately given by principal or surety, as each is served with notice of the action, to the Department of Administration, Division of Banking and Financial Institutions at P.O. Box 200546, Helena MT 59620-0546.

6. This bond shall become effective on \_\_\_\_\_.

SIGNED AND SEALED THIS \_\_\_\_\_ DAY OF \_\_\_\_\_, 20\_\_\_\_\_.

**To be completed by licensee:**

**(Complete one of the following, Individual Principal, Partnership or Corporate Principal, or Other Entities)**

**INDIVIDUAL PRINCIPAL (SOLE PROPRIETORSHIP)**

By \_\_\_\_\_ Typed Name \_\_\_\_\_  
(Affix Seal if available)

**PARTNERSHIP OR CORPORATE PRINCIPAL**

By \_\_\_\_\_ Typed Name \_\_\_\_\_  
Title \_\_\_\_\_ Business Name \_\_\_\_\_  
(Affix Corporate Seal if available) Address \_\_\_\_\_

**OTHER ENTITIES (L.L.C., L.P. & L.L.P) PRINCIPAL**

By \_\_\_\_\_ Typed Name \_\_\_\_\_  
Title \_\_\_\_\_ Business Name \_\_\_\_\_  
(Affix Seal if available)  
Address \_\_\_\_\_

**To be completed by notary:**  
**(Complete one of the following, Individual Principal, Partnership, Corporation or Other Entities)**

**ACKNOWLEDGMENT OF PRINCIPAL**  
**(Individual Principal – Sole Proprietor)**

State of \_\_\_\_\_ )  
 ) ss  
County of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, known to me to be the individual described in and who executed the foregoing instrument and acknowledged to me that he executed the same.

\_\_\_\_\_  
(Signature of notarial officer)  
(Seal, if any)

\_\_\_\_\_  
(Name - typed, stamped, or printed)

\_\_\_\_\_  
Title (and Rank)

\_\_\_\_\_  
(Residing at)

My commission expires: \_\_\_\_\_

**ACKNOWLEDGMENT OF PRINCIPAL**  
**(Partnership)**

State of \_\_\_\_\_ )  
 ) ss  
County of \_\_\_\_\_ )

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, who acknowledged himself to be one of the partners of \_\_\_\_\_, a partnership, and that he, as such partner, being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the partnership by himself as a partner.

\_\_\_\_\_  
(Signature of notarial officer)  
(Seal, if any)

\_\_\_\_\_  
(Name - typed, stamped, or printed)

\_\_\_\_\_  
Title (and Rank)

\_\_\_\_\_  
(Residing at)

My commission expires: \_\_\_\_\_

**ACKNOWLEDGEMENT OF PRINCIPAL  
(Corporation)**

State of \_\_\_\_\_)  
) ss  
County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, who acknowledged himself to be the \_\_\_\_\_ of \_\_\_\_\_, a corporation, and that he, as such \_\_\_\_\_ being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the corporation by himself as \_\_\_\_\_.

\_\_\_\_\_  
(Signature of notarial officer)  
(Seal, if any)

\_\_\_\_\_  
(Name - typed, stamped, or printed)

\_\_\_\_\_  
Title (and Rank)

\_\_\_\_\_  
(Residing at)

My commission expires: \_\_\_\_\_

**ACKNOWLEDGEMENT OF PRINCIPAL  
(Other Entities – L.L.C, L.P. & L.L.P.)**

State of \_\_\_\_\_)  
) ss  
County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, who acknowledged himself to be the \_\_\_\_\_ of \_\_\_\_\_, a L.L.C or L.L.P. , and that he, as such \_\_\_\_\_ being authorized so to do, executed the foregoing instrument for the purposes therein contained, by signing the name of the L.L.C. or L.L.P. by himself as \_\_\_\_\_.

\_\_\_\_\_  
(Signature of notarial officer)  
(Seal, if any)

\_\_\_\_\_  
(Name - typed, stamped, or printed)

\_\_\_\_\_  
Title (and Rank)

\_\_\_\_\_  
(Residing at)

My commission expires: \_\_\_\_\_

**To be completed by surety:**

**INDIVIDUAL, PARTNERSHIP OR CORPORATE SURETY**

By \_\_\_\_\_ Typed Name \_\_\_\_\_  
Title \_\_\_\_\_ Business Name \_\_\_\_\_  
(Affix Corporate Seal if available)

Address \_\_\_\_\_  
Countersigned by \_\_\_\_\_ Typed Name \_\_\_\_\_

**To be completed by notary:  
(Complete Corporate Officer or Attorney-In-Fact)**

**ACKNOWLEDGMENT OF SURETY  
(Corporate Officer)**

State of \_\_\_\_\_)  
) ss  
County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me, a Notary Public in and for said County, personally appeared \_\_\_\_\_ personally known to me, who being by me duly sworn, did say that he is the aforesaid officer of the \_\_\_\_\_ of \_\_\_\_\_, a corporation duly organized and existing under the laws of the State of \_\_\_\_\_, that the seal affixed to the foregoing instrument is the corporate seal of said corporation, that the said instrument was signed, sealed and executed in behalf of said corporation by authority of its Board of Directors, and further acknowledges that the said instrument and the execution thereof to be the voluntary act and deed of said corporation.

IN WITNESS WHEREOF, I have hereunto subscribed by name and affixed by official seal at \_\_\_\_\_, the day and year last above written.

\_\_\_\_\_  
(Signature of notarial officer)  
(Seal, if any)

\_\_\_\_\_  
(Name - typed, stamped, or printed)

\_\_\_\_\_  
Title (and Rank)

\_\_\_\_\_  
(Residing at)

My commission expires: \_\_\_\_\_

**ACKNOWLEDGMENT OF SURETY  
(Attorney-In-Fact)**

State of \_\_\_\_\_)  
) ss  
County of \_\_\_\_\_)

On this \_\_\_\_\_ day of \_\_\_\_\_, 20\_\_\_\_, before me personally appeared \_\_\_\_\_, known to me or satisfactorily proven to the person whose name is subscribed as attorney in fact for \_\_\_\_\_ and acknowledged that he executed the same as the act of his principal for the purpose therein contained.

IN WITNESS WHEREOF, I have hereunto subscribed my name and affixed my official seal at \_\_\_\_\_, the day and year last above written.

\_\_\_\_\_  
(Signature of notarial officer)  
(Seal, if any)

\_\_\_\_\_  
(Name - typed, stamped, or printed)

\_\_\_\_\_  
Title (and Rank)

\_\_\_\_\_  
(Residing at)

My commission expires: \_\_\_\_\_

*Note: A true and correct copy of the applicable "Power of Attorney" must be attached hereto where the Bond is subscribed to by an "Attorney in Fact".*